

DEPARTMENT OF THE ARMY
UNITED STATES ARMY DENTAL ACTIVITY
Fort Huachuca, Arizona 85613-7040

DENTAC Memorandum
No. 40-2

21 September 1998

Medical Services
ARMY MEDICAL TREATMENT FACILITIES GENERAL ADMINISTRATION
DENTAL OFFICER OF THE DAY (DOD)

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1. HISTORY. This is a revision of an existing publication.
2. PURPOSE. This memorandum establishes policy and outlines responsibilities and procedures for dentists serving as Dental Officer of the Day (DOD) for U.S. Army Dental Activity (USADENTAC), Fort Huachuca, Arizona.
3. REFERENCES.
 - a. AR 40-66, Medical Record Administration, 20 July 1995.
 - b. TB Med 250, Recording Dental Examinations, Diagnoses, and Treatments; and Appointment Control, February 1990.
4. SCOPE. To establish policies and procedures for a Dental Officer of the Day (DOD) for Headquarters, U.S. Army Dental Activity (USADENTAC), Fort Huachuca, Arizona.
5. RESPONSIBILITIES.
 - a. The DOD is responsible for all dental patients seen after normal duty hours.
 - b. The DOD will keep the Dental Charge of Quarters (DCQ) informed of his/her location at all times. A beeper will be assigned to the DOD and should be kept in his/her possession

when away from a telephone. The DOD will check the beeper daily and before leaving a location with a telephone to ensure that the beeper is functioning properly.

This memorandum supersedes DENTAC Memo 40-2-1, 30 Oct 95

c. The DOD will inform the DENTAC Commander of all patients seen during his/her tour of duty that are of command concern or that require further guidance.

d. The DOD will familiarize himself/herself with the duty roster and be available for duty as required. The exchange of duty is authorized but must be approved by the DENTAC Commander. Individuals may request exchange of DOD duty using overprint memorandum through respective clinic chiefs to Commander, USADENTAC (see appendix A).

e. The DENTAC First Sergeant (1SG) will prepare the DOD Duty Roster and assure timely notification of detailed personnel. Each individual on the roster will receive a copy and additional official copies will be posted on unit bulletin boards.

6. POLICY.

a. The DOD should recognize the importance of his/her services and be responsive after duty hours to emergency calls, and treat all patients to the best of his/her ability. The DOD should not regard a call after duty hours as an imposition, but as a fulfillment of his/her obligations as a health professional. DOD will respond to the emergency call within a reasonable time.

b. The DOD need not wear the duty uniform; professional-looking, civilian clothes are appropriate. Males must be clean shaven.

c. Emergency dental care. The DOD will be available during non-duty hours and during such periods during regular duty hours when the staff is away from the clinic on official business, at training conferences, staff meetings, and so forth. When a dental patient arrives at The Prime Time Clinic (PTC) seeking emergency care, the PTC staff will beep/call the Dental Charge of Quarters (DCQ) who will subsequently contact the DOD. If the patient requests a clinical evaluation, the DOD will come to the PTC, evaluate the patient, and render appropriate treatment.

(1) The treatment of choice will normally be limited to the relief of the existing emergency condition. Even though palliative measures are generally the treatment of choice, if an uncomplicated extraction is indicated, the operation may be performed at this time. When prescribing drugs, the DOD will complete the prescription form. A record of the drug and dosage will be entered by the DOD in the patient's SF 603/603A and on DA Form 1594 (Duty Officer Log). Along with a review of the

medical history, the patient will be asked if he/she is allergic to the proposed medication.

(2) The DOD may consult or request assistance from other available dental officers during the treatment of complicated emergencies. When the services of an oral surgeon are required, the PTC staff will refer the case to Tucson Medical Center under supplemental care. Such cases, after having been evaluated by the DOD, will be considered MEDICAL emergencies. Instructions will be given to the patient to report back to the dental clinic upon his or her release from the referral care. Follow-up instructions (such as dietary requirements, pain medication, and duty obligations) will be provided by the DOD until the patient can be seen during duty hours.

(3) All treatment will be provided the patient by the DOD. The DCQ will in no instance assume any responsibility for the professional aspects of the case, other than those normally performed by a dental assistant. Radiographs may be taken by the DCQ if required by the DOD prior to his/her arrival at the dental clinic. No definitive treatment or diagnosis will be performed by the DCQ.

(4) Special attention by the DOD must be given to all patients under the influence of alcohol or drugs. A serious consideration is the medico-legal liability of these patients to give their consent to receive treatment. In the opinion of the doctor, if they are not completely able to understand the proposed treatment, only that treatment essential to save life or prevent undue suffering will be given. Instructions will be written with a duplicate copy placed in the patient's record. If possible, there should be another person accompanying the patient to receive treatment instructions. If uncontrollable problems arise during the process of treating an incoherent patient, contact the Administrative Officer of the Day (AOD) for assistance in the proper disposition of these patients.

(5) In the event that patients of the opposite sex of that of the DCQ arrives unaccompanied by another adult, the DCQ will assure that the unaccompanied patient is retained in the PTC until the DOD arrives. Under no circumstances should a DCQ or DOD be in a room with a member of the opposite sex without a chaperone. Wait or call for assistance.

(6) No minor children will be treated unless accompanied by an adult empowered to sign for authorization for treatment (DD Form 522, appendix F), unless treatment of a lifesaving nature is required. A minor who is married is legally considered an adult. A legal guardian must show proof of custodianship or possess a special power of attorney to sign for a minor.

d. Personnel authorized emergency care. Emergency dental care is authorized for the following:

(1) Active duty and retired military personnel and their family members. All personnel will present a valid Department of Defense Identification Card upon request. All personnel presenting for treatment must be on the DEERS program. This determination will be made by the PTC staff prior to treatment. A MEDDAC Form 138 (Eligibility Statement and Billing Form) will be completed if the patient is not on the DEERS program.

(2) DA civilian employees reporting to the PTC for on-the-job injuries must have in their possession a DA Form 1051 which was initiated by the employee's supervisor or by the AOD before reporting to the dental clinic for emergency treatment. A MEDDAC Form 138 will be completed on these patients and forwarded to Records Section, DENTAC, the next duty day.

(3) Civilian personnel may receive emergency treatment when this care is not available through civilian sources, and the required treatment is indicated for humanitarian reasons. A common chronic "toothache" is not considered an emergency. Relief of pain will be limited to palliative treatment only which may include a sedative drug, placing of a sedative temporary filling, or extraction of the offending tooth, if deemed necessary by the DOD. The placing of permanent restorations is not considered emergency care. Civilians receiving emergency dental care are required to pay a prescribed outpatient treatment fee, regardless of the service rendered. The necessary administrative paperwork and collection of fees will be taken care of by the AOD prior to rendering emergency care. The patient's name, telephone number, and receipt number will be recorded on the SF 603 (Dental Health Record). A MEDDAC Form 138 will be completed on these patients and forwarded to the Records Section, DENTAC, the next duty day.

7. PROCEDURES.

a. Tour of duty. The tour of duty for the DOD will be one week, from 0700 Wednesday to 0700 the following Wednesday. The DOD will read all instructions and memorandums prior to assumption of duty.

b. Duty station. The DOD will perform emergency treatment in the Prime Time Clinic, Raymond W. Bliss Army Health Center or Runion Dental Clinic (RDC). The DOD will be on call during his/her tour of duty and may stay at his/her residence, or use the beeper. In any event, the DOD will be no more than 20 minutes from the PTC at all times. The DOD will acknowledge the emergency call by calling the PTC. DOD will provide instruction to the DCQ or PTC personnel according to the severity of the case.

c. Records. All dental administrative and treatment records required in the performance of the DOD's duties and instructions for their completion, are kept in the DCQ notebook which is kept in possession by the DCQ during his/her tour of duty. Included are the following:

(1) DA Form 1594. The DCQ will maintain a daily log of relevant activities during tour of duty. Entries will indicate all administrative and patient treatment. Any unusual circumstances will be reported in the "incidents, messages, orders, etc." section. An abbreviated description of the services rendered in the treatment of a patient will be entered in the diagnosis and treatment column in accordance with TB MED 250.

(2) SF 603.

(a) The DOD will use the patient's dental health record (DHREC) when available. The date and a detailed description of services rendered will be entered in section 17 of the SF 603 by the DOD and the DOD will initial the entry.

(b) If the patient's DHREC is not accessible but exists, the DCQ will complete a blank SF 603A with the information in para(2)(a) above plus the entry of the patient's full name and social security number.

(3) DD Form 2005 (Privacy Act Statement). All patients are requested to sign, give social security number, and date. If the patient refuses to sign, then the DCQ will complete social security number and date, and enter at the bottom of the form that the patient refused to sign. The DCQ will then sign the form.

(4) DA Form 5570 (Health Questionnaire for Dental Treatment). A medical history will be taken on all patients prior to treatment. If the patient is pregnant or under a physician's care, before initiating treatment consultation should be made with the PTC physician. The DOD and PTC physician will then determine the appropriate emergency dental care and if further consultation with an OB/GYN physician is necessary.

(5) SF 522 (Authorization for Administration of Anesthesia and for Performance of Operations and Other Procedures). All non-active duty individuals are required to sign a consent form authorizing the prescribed specific treatment to be performed. If the patient is a minor, under the age of 21 (18 in Arizona), the signature of a parent or legal guardian is required. The dental assistant or another adult present will sign as witnessing the consent for treatment and the DOD will sign in the appropriate space.

f. Hospitalization. Dental patients requiring hospitalization or care beyond our means should be referred by the PTC to the appropriate hospital.

g. Prescription drugs.

(1) During non-duty hours, the main pharmacy is closed; however, a limited number of drugs are stocked in the PTC. In view of the limited supply available during non-duty hours, only that amount of drugs necessary to cover the patient until the next duty day will be prescribed.

(2) All prescriptions will contain the DOD's name, grade, branch, signature, and social security number. Dosages will be written in script, rather than numerical designation. Controlled substances should indicate quantity in both script and numerical designation.

h. Accident reporting. It is extremely important that all recorded notations are entered accurately and completely in the SF 603. In some instances, the dental officer may be required, through legal process, to appear as an expert witness, especially if he/she has treated an accident patient while on duty as DOD. The DOD is not an investigating officer; therefore, he/she should not pressure the patient or other witnesses. However, vague or indefinite answers should be noted. The recorded entries should include, as a minimum, but not be limited to the following:

- (1) Condition of the patient, including the type and extent of injuries.
- (2) Time seen.
- (3) Apparent physical condition (such as state of consciousness and other physical abnormalities).
- (4) Apparent mental attitude; for example, is the patient extremely excited, nervous, apprehensive, exceptionally calm, and so forth?
- (5) Record of pertinent data concerning circumstances of accident, to include the following:
 - (a) Cause--such as automobile accident, fight, fall, and so forth.
 - (b) Where--location of accident.
 - (c) When--time of accident (estimate as closely as possible).
 - (6) Treatment rendered to include drugs, dosage, and post-operative treatment instructions.
- i. Standardization of DOD log entries. In addition to mandatory information of name, social security number (or that of sponsor), age and sex, include the following:
 - (1) Chief complaint.
 - (2) Statement on medical history.
 - (3) Diagnosis.
 - (4) Immediate treatment.
 - (5) Follow-up treatment needed or where patient is to be routed.
- j. Keys. The DCQ will obtain keys from the NCOIC of RDC and keep them until tour of duty is complete.
- k. Personal emergencies.
 - (1) If the DOD or DCQ must be relieved from his/her tour of duty, the DOD will immediately notify the 1SG for a replacement.

(2) The Executive Officer and/or DENTAC commander will be notified in all cases of serious incidents.

l. Complete dental records. The completed SF 603, including all forms described above, will be turned in to the RDC Front Desk Receptionist the following duty day by the DCQ.

m. Complete report of DOD. The report of the DOD (DA Form 1594, Duty Officer Log) will be prepared daily and forwarded weekly through the 1SG and/or XO, to the Commander, USADENTAC each Wednesday morning.

The proponent of this publication is the Office of the Commander. Send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) to Commander, U.S. Army Dental Activity, ATTN: DSBJ-CDR, Fort Huachuca, AZ 85613-7040

//Original Signed By//

HARLAND G. LEWIS, JR.
Colonel, Dental Corps
Commanding

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Appendix A

DSBJ-CDR (40)

MEMORANDUM THRU Clinic Chief

FOR Commander, USADENTAC

SUBJECT: Request for Exchange of Duty

1. Request exchange of duties on dates listed below:

DUTY:

REQUESTOR

EXCHANGE

NAME:

NAME:

DUTY DATE:

DUTY DATE:

SIGNATURE:

SIGNATURE:

REASON FOR EXCHANGE:

APPROVED/DISAPPROVED:

NCOIC

APPROVED/DISAPPROVED:

Clinic Chief

APPROVED/DISAPPROVED:

XO/1SG

APPROVED/DISAPPROVED:

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